



LEE'S SUMMIT
MISSOURI

Scope of Work Statement

Applicant: Celeste Installations Contractor/Homeowner/Tenant? (Circle one)

Primary Contact: Jerry Phone: 816-536-3999 Email: JCSPARKEY@wmcconnect.com

Project Address: 906 NW Chipman Rd

Name of Owner: _____ Phone: _____

Residential/Commercial? (Circle one)

Water service repair/replace: ☐

Work in right of way? ☐

Sewer service repair/replace: ☐

Work in right of way? ☐

Electrical service ^{New} repair/replace: ☐

Amperage: 60 (Engineer required of ≥ 400)

HVAC repair/replace ☐

Uncovered deck: ☐

Covered deck: ☐ Square feet: _____

Accessory Structure: ☐

Description: _____ Square feet _____

Interior Alterations: ☐

Description: _____ Square feet _____

Addition: ☐

Description: _____ Square feet _____

Retaining wall over 48" ☐

Swimming pool ☐

Electrical contractor _____ Plumber (NG?) _____

Lawn irrigation ☐

Other: ☐

60 Amp Elect. Service for Time-Warner
Power Supply

Cost of project including labor \$ 800.00

AFFIDAVIT: I hereby certify that I have the authority to make the foregoing application and that the application, the best of my knowledge, is complete and correct and that the permitted construction will conform to the regulations in the codes adopted by the City of Lee's Summit and all applicable ordinances.

Signature of Applicant

Printed Name of Applicant

Date